

<b>SCC eFile</b>	<b>2014 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	214501387				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>ACG National Capital, Inc.</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>CORPORATION SERVICE COMPANY</b>  <b>Bank of America Center, 16th Floor</b>  <b>1111 East Main Street</b></p> <p><b>RICHMOND, VA</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>RICHMOND CITY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>IL</b></p> </div> <div style="width: 35%; text-align: right;"> <p>DUE DATE: <b>1/31/2014</b></p> <p>SCC ID NO: <b>F1653874</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED		
CLASS	AUTHORIZED					
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 125 S WACKER DRIVE SUITE 3100</p> <p style="text-align: center;">CITY/ST/ZIP: CHICAGO, IL 60606</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: DARA CASTLE  TITLE: PRESIDENT  ADDRESS: 1934 Old Gallows Road  SUITE 400  CITY/ST/ZIP/CO: VIENNA, VA 22182 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> DIRECTOR </td> <td style="width: 30%;"></td> </tr> </table>			NAME: DARA CASTLE TITLE: PRESIDENT ADDRESS: 1934 Old Gallows Road SUITE 400 CITY/ST/ZIP/CO: VIENNA, VA 22182	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: DARA CASTLE TITLE: PRESIDENT ADDRESS: 1934 Old Gallows Road SUITE 400 CITY/ST/ZIP/CO: VIENNA, VA 22182	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: RONALD MORGAN  TITLE: Past President  ADDRESS: 1934 Old Gallows Road  SUITE 400  CITY/ST/ZIP/CO: Vienna, VA 22182 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> OFFICER </td> <td style="width: 10%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> DIRECTOR </td> <td style="width: 30%;"></td> </tr> </table>			NAME: RONALD MORGAN TITLE: Past President ADDRESS: 1934 Old Gallows Road SUITE 400 CITY/ST/ZIP/CO: Vienna, VA 22182	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: RONALD MORGAN TITLE: Past President ADDRESS: 1934 Old Gallows Road SUITE 400 CITY/ST/ZIP/CO: Vienna, VA 22182	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
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NAME: ADAM J. AUGUST TITLE: VP MEMBERSHIP ADDRESS: 1934 Old Gallows Road. SUITE 400 CITY/ST/ZIP/CO: Vienna, VA 22182	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
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NAME:	SUSAN EVANS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1934 Old Gallows Road SUITE 400		
CITY/ST/ZIP/CO:	Vienna, VA 22182		
NAME:	ALAN FRIEDMAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1934 Old Gallows Road Suite 400		
CITY/ST/ZIP/CO:	VIENNA, VA 22182		
NAME:	ROBERT GEORGE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1934 Old Gallows Road SUITE 400		
CITY/ST/ZIP/CO:	Vienna, VA 22182		
NAME:	LESLIE HALE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1934 Old Gallows Road SUITE 400		
CITY/ST/ZIP/CO:	VIENNA, VA 22182		
NAME:	CATHERINE C. JONES	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1934 Old Gallows Road SUITE 400		
CITY/ST/ZIP/CO:	Vienna, VA 22182		
NAME:	NUHAD E. KARAKI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1934 Old Gallows Road Suite 400		
CITY/ST/ZIP/CO:	Vienna, VA 22182		
NAME:	ANIRUDH KULKARNI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1934 Old Gallows Road SUITE 400		
CITY/ST/ZIP/CO:	Vienna, VA 22182		
NAME:	TERRANCE C. MCGOVERN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1934 Old Gallows Road Suite 400		
CITY/ST/ZIP/CO:	Vienna, VA 22182		
NAME:	SCOTT MEZA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP Programs		
ADDRESS:	1934 Old Gallows Road. SUITE 400		
CITY/ST/ZIP/CO:	Vienna, VA 22182		
NAME:	MANIK RATH	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	President Elect		
ADDRESS:	1934 Old Gallows Road Suite 400		
CITY/ST/ZIP/CO:	Vienna, VA 22182		

NAME: TUCKER SAMPSON TITLE: DIRECTOR ADDRESS: 1934 Old Gallow Road Suite 400 CITY/ST/ZIP/CO: Vienna, VA 22182	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: CURTIS L. SCHEHR TITLE: DIRECTOR ADDRESS: 1934 Old Gallows Road SUITE 400 CITY/ST/ZIP/CO: Vienna, VA 22182	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: GREGORY V. WOODFORD TITLE: DIRECTOR ADDRESS: 1934 Old Gallows Road SUITE 400 CITY/ST/ZIP/CO: Vienna, VA 22182	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.	
/s/ DARA CASTLE	DARA CASTLE, PRESIDENT
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.	